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04-22-04

1647#

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PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

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APR 20 2004

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

15

Application Number

09/707,730

Filing Date

November 6, 2000

First Named Inventor

HILL, CRAIG

Group Art Unit

1647

Examiner Name

LANDSMAN, ROBERT S.

Attorney Docket Number

ASIL-002CIP

ENCLOSURES (check all that apply)**Fee Transmittal Form****In Duplicate**☐ Fee Attached**Amendment / Reply**☐ After Final☐ Affidavits/declaration(s)**Extension of Time Request**

Express Abandonment Request

**Information Disclosure Statement****PTO/SB/08a**

Certified Copy of Priority Documents

Response to Missing Parts/
Incomplete Application☐ Response to Missing Parts
under 37 CFR 1.52 or 1.53Assignment Papers
(for an Application)

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a
Provisional ApplicationPower of Attorney, Revocation
Change of Correspondence
Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s)

After Allowance Communication
to GroupAppeal Communication to Board
of Appeals and InterferencesAppeal Communication to Group
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



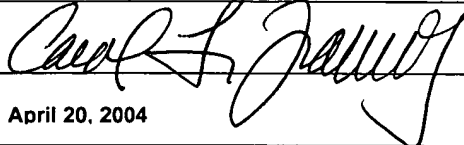
Status Letter

Other Enclosure(s) (please
identify below):**3 References****Postcard**

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENTSigning Attorney/Agent
(Reg. No.)CAROL L. FRANCIS, 36.513
BOZICEVIC, FIELD & FRANCIS LLP

Signature



Date

April 20, 2004

EXPRESS MAIL LABEL NO. EV 405281343 US

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 655.00)

Complete if Known

Application Number	09/707,730
Filing Date	November 6, 2000
First Named Inventor	HILL, CRAIG
Examiner Name	LANDSMAN, ROBERT S.
Art Unit	1647
Attorney Docket No.	ASIL-002CIP

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None
Order☒ Deposit Account:Deposit
Account
Number
Deposit
Account
Name

50-0815

Bozicevic, Field & Francis LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge Any Additional Fee(s) Required under 37 C.F.R. 1.17.☐ Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee	Small Entity Fee	Fee Description
Code (\$)	Code (\$)	
1001 770	2001 385	Utility filing fee
1002 340	2002 170	Design filing fee
1003 530	2003 265	Plant filing fee
1004 770	2004 385	Reissue filing fee
1005 160	2005 80	Provisional filing fee

Fee Paid

SUBTOTAL (1)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	x	=
Indep. Claims	-3** =	x	=
Multiple Dependent			=

Large Entity Small Entity

Large Entity Fee	Small Entity Fee	Fee Description
Code (\$)	Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$

**or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description
Code (\$)	Code (\$)	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053 130	1053 130	Non-English specification
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination
1804 920*	1804 920*	Requesting publication of SIR prior to Examination action
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251 110	2251 55	Extension for reply within first month
1252 420	2252 210	Extension for reply within second month
1253 950	2253 475	Extension for reply within third month
1254 1,480	2254 740	Extension for reply within fourth month
1255 2,010	2255 1,005	Extension for reply within fifth month
1401 330	2401 165	Notice of Appeal
1402 330	2402 165	Filing a brief in support of an appeal
1403 290	2403 145	Request for oral hearing
1451 1,510	1451 1,510	Petition to institute a public use proceeding
1452 110	2452 55	Petition to revive - unavoidable
1453 1,330	2453 665	Petition to revive - unintentional
1501 1,330	2501 665	Utility issue fee (or reissue)
1502 480	2502 240	Design issue fee
1503 640	2503 320	Plant issue fee
1406 130	1460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)
1806 180	1806 180	Submission of Information Disclosure Stmt
8021 40	8021 40	Recording each patent assignment per property (times number of properties)
1809 770	2809 385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 770	2810 385	For each additional invention to be examined (37 CFR § 1.129(b))
1801 770	2801 385	Request for Continued Examination (RCE)
1802 900	1802 900	Request for expedited examination of a design application

Fee Paid

475.00

180.00

655.00

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Carol D. Francis	Registration No. (Attorney/Agent)	36,513	Telephone	(650) 833-7713
Signature		Date	04/20/2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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